

Binge Eating Disorder



U.S. DEPARTMENT
OF HEALTH AND
HUMAN SERVICES

WIN *Weight-control Information Network*

How do I know if I have binge eating disorder?

Most of us overeat from time to time, and some of us often feel we have eaten more than we should have. Eating a lot of food does not necessarily mean that you have binge eating disorder. Experts generally agree that *most people with serious binge eating problems often eat an unusually large amount of food and feel their eating is out of control*. People with binge eating disorder also may:

- eat much more quickly than usual during binge episodes
- eat until they are uncomfortably full
- eat large amounts of food even when they are not really hungry
- eat alone because they are embarrassed about the amount of food they eat
- feel disgusted, depressed, or guilty after overeating.

Binge eating also occurs in another eating disorder called bulimia nervosa. Persons with bulimia nervosa, however, usually purge, fast, or do strenuous exercise after they binge eat. Purging means vomiting or using a lot of diuretics (water pills) or laxatives to keep from gaining weight. Fasting is not eating for at least 24 hours. Strenuous exercise, in this case, means exercising for more than an hour just to keep from gaining weight after binge eating. Purging, fasting, and overexercising are dangerous ways to try to control your weight.

How common is binge eating disorder, and who is at risk?

Binge eating disorder is the most common eating disorder. It affects about 2 percent of all adults in the United States (as many as 4 million Americans).

People of any age can have binge eating disorder, but it is seen more often in middle-aged adults (ages 46 to 55 years). Binge eating disorder is a

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little more common in women than in men; three women for every two men have it. The disorder affects blacks as often as whites. It is not known how often it affects people in other ethnic groups.

Although most obese people do not have binge eating disorder, people with this problem are usually overweight or obese.* Binge eating disorder is more common in people who are severely obese. Normal-weight people also can have the disorder.

People who are obese and have binge eating disorder often became overweight at a younger age than those without the disorder. They might also lose and gain weight (yo-yo diet) more often.

What causes binge eating disorder?

No one knows for sure what causes binge eating disorder. As many as half of all people with binge eating disorder are depressed or have been depressed in the past. Whether depression causes binge eating disorder or whether binge eating disorder causes depression is not known.

It is also unclear if dieting and binge eating are related. Some people binge eat after dieting. Dieting here means skipping meals, not eating enough food each day, or avoiding certain kinds of food. These are unhealthy ways to try to change your body shape and weight.

Studies suggest that people with binge eating may have trouble handling some of their emotions. Many people who are binge eaters say that being angry, sad, bored, worried, or stressed can cause them to binge eat.

Certain behaviors and emotional problems are more common in people with binge eating disorder. These include abusing alcohol, acting quickly without thinking (impulsive behavior), not feeling in charge of themselves, not feeling a part of their communities, and not noticing and talking about their feelings.

Researchers are looking into how brain chemicals and metabolism (the way the body uses calories) affect binge eating disorder. Other research suggests that genes may be involved in binge eating, since the disorder often occurs in several members of the same family. This research is still in the early stages.

* The 1998 NIH Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults define overweight as a body mass index (BMI) of 25 to 29.9 and obesity as a BMI of 30 or more. BMI is calculated by dividing weight (in kilograms) by height (in meters) squared.

What are the complications of binge eating disorder?

People with binge eating disorder are usually very upset by their binge eating and may become depressed. Research has shown that people with binge eating disorder report more health problems, stress, trouble sleeping, and suicidal thoughts than people without an eating disorder do. People with binge eating disorder often feel bad about themselves and may miss work, school, or social activities to binge eat.

People with binge eating disorder may gain weight. Weight gain can lead to obesity, and obesity puts people at risk for many health problems, including:

- type 2 diabetes
- high blood pressure
- high blood cholesterol levels
- gallbladder disease
- heart disease
- certain types of cancer.

Most people who binge eat, whether they are obese or not, feel ashamed and try to hide their problem. Often they become so good at hiding it that even close friends and family members do not know they binge eat.

Should people with binge eating disorder try to lose weight?

Many people with binge eating disorder are obese and have health problems because of their weight. They should try to lose weight and keep it off; however, research shows that long-term weight loss is more likely when a person has long-term control over his or her binge eating.

People with binge eating disorder who are obese may benefit from a weight-loss program that also offers treatment for eating disorders. However, some people with binge eating disorder may do just as well in a standard weight loss program as people who do not binge eat.

People who are not overweight should avoid trying to lose weight, because it sometimes makes their binge eating worse.

How can people with binge eating disorder be helped?

People with binge eating disorder should get help from a health professional such as a psychiatrist, psychologist, or clinical social worker. There are several different ways to treat binge eating disorder.

- *Cognitive-behavioral therapy* teaches people how to keep track of their eating and change their unhealthy eating habits. It teaches them how to

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change the way they act in tough situations. It also helps them feel better about their body shape and weight.

- *Interpersonal psychotherapy* helps people look at their relationships with friends and family and make changes in problem areas.
- *Drug therapy*, such as antidepressants, may be helpful for some people.

The methods mentioned here seem to be equally helpful. Researchers are still trying to find the treatment that is the most helpful in controlling binge eating disorder. Other therapies being tried include dialectical behavior therapy, which helps people regulate their emotions; drug therapy with the anti-seizure medication topiramate; weight loss surgery (gastrointestinal surgery); exercise used alone or in combination with cognitive-behavioral therapy; and self-help. Self-help books, videos, and groups have helped some people to control their binge eating.

You are not alone.

If you think you might have binge eating disorder, it is important to know that you are not alone. Most people who have the disorder have tried but failed to control it on their own. You may want to get professional help. Talk to your health care provider about the type of help that may be best for you. The good news is that most people do well in treatment and can overcome binge eating.

For More Information

For more information, contact one of the centers listed on page 5.*

National Eating Disorder Association

Information and Referral Program

603 Stewart Street, Suite 803

Seattle, WA 98101

1-800-931-2237

(206) 382-3587

(206) 829-8501 (fax)

Web: www.nationaleatingdisorders.org

Email: info@nationaleatingdisorders.org

Academy for Eating Disorders

6728 Old McLean Village Drive

McLean, VA 22101

(703) 556-9222

(703) 556-8729 (fax)

Web: www.aedweb.org

Email: aed@degnon.org

* Inclusion of organizations and materials is for information only and does not imply endorsement by NIDDK or WIN.

The following programs are for patients with binge eating disorder or compulsive overeating.

	Program Type					Treatment Used			Patients Treated			Conduct Clinical Studies
	Inpatient	Outpatient	Individual Therapy	Group Therapy	Family Therapy	Cognitive-behavioral Therapy	Interpersonal Therapy	Drug Therapy	Children (under 12)	Adolescents (12-17)	Adults (18 and up)	
Behavioral Medicine Department of Psychiatry Stanford University 401 Quarry Road, Stanford, CA 94305 (650) 498-9111	■	■	■		■	■		■	■	■	■	■
Center for Overcoming Problem Eating/ Eating Disorders Clinic Western Psychiatric Institute and Clinic University of Pittsburgh Medical Center 3811 O'Hara Street, Pittsburgh, PA 15213 (412) 246-6390		■	■		■	■		■	■	■	■	■
Eating Disorders Clinic New York State Psychiatric Institute Columbia Presbyterian Medical Center 1051 Riverside Drive, NYSPH Unit 98, New York, NY 10032 (212) 543-5739	■	■	■			■				■	■	■
Eating Disorder Program at the University of Chicago Hospitals Department of Psychiatry, MC 3077 The University of Chicago 5841 S. Maryland Avenue, Chicago, IL 60637 (773) 834-5677	■	■	■	■	■	■	■	■	■	■	■	■
Eating Disorder Research Program University of Minnesota 606 24 th Avenue South, Suite 602, Minneapolis, MN 55454 (612) 627-1991		■	■	■		■	■	■			■	■
Rutgers Eating Disorders Clinic GSAPP Rutgers University 41 Gordon Road, Piscataway, NJ 08854 (732) 445-2292		■	■			■				■	■	■
Weight and Eating Disorders Program University of Pennsylvania 3535 Market Street, Philadelphia, PA 19104 (215) 898-7314		■	■			■				■	■	■
Yale Center for Eating and Weight Disorders Yale University, Department of Psychology P.O. Box 208205, New Haven, CT 06520 (203) 432-4610		■	■	■	■	■	■			■	■	■
Eating Disorder Program Golisano Children's Hospital at Strong 601 Elmwood Avenue, Box 690, Rochester, NY 14642 (585) 275-7844		■	■			■		■		■	■	
Center for Brief Therapy Department of Clinical Psychology Philadelphia College of Osteopathic Medicine 4190 City Avenue, Rolland Hall, Suite 532, Philadelphia, PA 19131 (215) 871-6487		■	■			■				■	■	
Child and Adolescent Eating Disorders Program Menninger Clinic P.O. Box 809045, Houston, TX 77280 (800) 351-9058	■	■	■	■	■		■	■	■	■		■

Additional Reading

Grilo, CM. "The assessment and treatment of binge eating disorders." *Journal of Practical Psychiatry and Behavioral Health*, 1998: Vol. 4, pp.191-201. This article, written for health professionals, reviews the literature on binge eating disorder with a particular focus on its assessment and treatment. Implications for practice and future research are discussed.

Stunkard AJ. "Eating patterns and obesity." *Psychiatric Quarterly*, 1959: Vol. 33, pp. 284-295. This classic paper provides one of the first descriptions of binge eating in obese individuals.

Wilfley DE, Wilson GT, Agras WS. "The clinical significance of binge eating disorder." *International Journal of Eating Disorders*, 2003: Vol. 34 Suppl., pp. S96-106. This article, written for health professionals, reviews the literature on binge eating disorder to examine whether it is serious enough to be classified clinically as a mental health disorder.



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Weight-control Information Network

1 WIN WAY

BETHESDA, MD 20892-3665

Phone: (202) 828-1025

Toll-free number:
1-877-946-4627

FAX: (202) 828-1028

Email:
WIN@info.niddk.nih.gov

Internet: www.niddk.nih.gov/health/nutrit/nutrit.htm

The Weight-control Information Network (WIN) is a service of the National Institute of Diabetes and Digestive and Kidney Diseases of the National Institutes of Health, which is the Federal Government's lead agency responsible for biomedical research on nutrition and obesity. Authorized by Congress (Public Law 103-43), WIN provides the general public, health professionals, the media, and Congress with up-to-date, science-based health information on weight control, obesity, physical activity, and related nutritional issues.

WIN answers inquiries, develops and distributes publications, and works closely with professional and patient organizations and Government agencies to coordinate resources about weight control and related issues.

Publications produced by WIN are reviewed by both NIDDK scientists and outside experts. This fact sheet was also reviewed by James E. Mitchell, M.D., President, Neuropsychiatric Research Institute, and Professor and Chair, Department of Neuroscience, University of North Dakota, School of Medicine and Health Sciences.

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www.niddk.nih.gov/health/nutrit/nutrit.htm.